BOOK REVIEWS

Fetal and Infant Origins of Adult Disease. Ed D J P Barker. (pp 343; £24.95) BMJ, London, 1992. ISBN 0-7279-0743-3.

Though nothing in science is ever totally new, some observations have enough novelty, or are presented in a sufficiently novel way, to be captivating. The set of ideas gathered together here is a perfect example of this.

This collection of papers written by David Barker and colleagues with an introduction by Roger Robinson, Emeritus Professor of Paediatrics at Guy's and St Thomas's. It presents much of the evidence relating adult mortality and metabolism to early fetal and infant development. The story begins with descriptions of spatial and temporal associations made largely on the basis of routinely collected statistics from the United Kingdom and Norway. As with all such studies their results were inconclusive but raise a host of important questions. The methodological "breakthrough", as is well known to all devotees of television science as well as to those who follow the literature, was the existence in Hertfordshire and Lancashire, of well recorded data on the early lives of individuals whose later mortality and metabolic characteristics could be determined.

Important sections in the introduction deal with the difficult issue of confounding and the implications of these findings for prevention. Professor Robinson has covered these well. Neither his nor the later sections will, however, totally allay the doubts of the sceptical reader, but then, that is part of the attraction of these observations—they will stimulate discussion and activity for some time to come. For prevention the message is optimistic. It is not so much a case of action in adult life being too late but the strengthening of a previously promulgated message—that, to be effective, the prevention of adult disease must start early—with the health of the fetus and of the mother. If this volume can be faulted it is only because insufficient attention has been paid to evidence already accumulated by our veterinary colleagues that the health of each generation is heavily influenced from the time of conception and before.

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Occult Atherosclerotic Disease. Diagnosis, Assessment and Management. Eds A-M Salmasi, A N Nicolaides. (Pp 353; £86.50) Kluwer Academic Publishers, Dordrecht, 1991. ISBN 0-79231188-4.

Therapeutic attention in atherosclerosis has to date been focused upon those patients with clinically evident disease, often in the terminal form of organ infarction. The growth in non-invasive investigative procedures as well as the prospects for manipulating deranged vascular biology at an earlier phase of the disease process make the appearance of this book timely and necessary.

In traditional fashion the text begins with a treatise on the cell biology and pathology of atherosclerosis. The first is scholarly and a

useful summary of current knowledge; the second is poorly written and was not properly proof read.

The next four sections deal with occult cerebrovascular, coronary artery, aortic and lower limb, and renal and mesenteric arterial disease respectively. The international contributors are by and large authorities in their fields. The first three of these sections are introduced by excellent reviews of the natural history and epidemiology of arterial disease in their respective territories. Considerable attention is paid to the various diagnostic techniques for detecting preclinical arterial disease and contemporary management is discussed.

The final section of the book contains important directions for the future; the molecular revolution is anticipated in a review of the use of DNA technology in the diagnosis of occult atherosclerotic disease. Fascinating data on the concurrence of arterial disease at various sites and guidance on who should be investigated for occult atherosclerotic disease are presented.

Appropriately, the book ends with a section on prevention which necessitates a return to the aetiology of the condition and the role of risk factors. A cogent review of the place of cholesterol lowering is included but given the forward looking nature of the rest of the book it is perhaps disappointing that there is no reference to the unifying concept of the insulin resistance syndrome.

The book is well referenced and indexed and is an essential addition to the library of all those interested in contemporary management of atherosclerotic disease.

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Toxic Oil Syndrome: Current Knowledge and Future Perspectives. WHO, Geneva, 1992. (Pp 163; SwFr 31). ISBN 92 890 1305 2.

Toxic oil syndrome (TOS) is a food-borne disease which produced an outbreak of epidemic proportions in central Spain in the spring and summer of 1981. After toxic-epidemiological studies, there is wide consensus that a toxin was responsible for the condition and that it was spread among the population by rape seed oil, illegally sold for human consumption. The oil had been imported from France for industrial use at subsidised prices and denatured with aniline as a marker; it then underwent illegal refining to eliminate the tint, in a procedure whose details are not well known, and was eventually sold door to door or in weekly markets as edible oil.

More than 20 000 cases were diagnosed, about 1000 people died, many had sequelae, and a proportion of the victims are still developing late complications, such as pulmonary hypertension or chronic hepatitis. A precise aetiological agent has not yet been identified.

The report is the result of a joint effort of the Regional Office for Europe of the WHO and the Spanish Health Research Fund and aims to disseminate current knowledge on TOS in order to prevent the occurrence of similar

epidemics in the future. The description of the investigation of the outbreak is short and its public health implications are briefly discussed in the preface, foreword, and introduction; the bulk of the book is devoted to clinical and pathological description and to the toxicological studies. The final, "Future Research", chapter (no author mentioned) is to me a very interesting one and will produce the key to the final solution of the quest for the causal toxic agent. It also outlines a well constructed methodological frame that could apply to other research subjects.

The book constitutes another call for food safety in the context of health protection but it will be of more interest because of the clinical description and the toxicological investigation than the discussion of its implications for a healthy public policy.

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Authorities and Partisans: the Debate on Unemployment and Health. By Mel Bartley (Pp 258; £37.50) Edinburgh University Press, Edinburgh, 1992. ISBN 074860334-4.

With Britain "bumping along the floor of a recession" this book makes a timely and interesting contribution to published work on unemployment and health. Those interested in this important public health topic should be warned not to expect a review of evidence for the hypothesis that unemployment causes ill health. Instead, they will find in Mel Bartley's 240 page account a fascinating sociological history of how researchers took up this question, how they were funded for the research, and how their results were received, used and, in some cases, ignored by politicians and civil servants.

Most of the text is refreshingly clear, although there are occasional excursions into sociological detail and thinking which can be hard to follow. The way in which social science, public health, and economic thinking and research progressed with respect to unemployment during the late 1970s and 1980s is presented with very much that attention to the detail of personalities and processes involved that is seen in, for example, James Watson's account of the discovery of structure of DNA. The progress from research to policy is not at all a simple, objective process, but one that depends very much on the interests of researchers, their ability to secure funding, the way their case is published and presented and, finally and most importantly, the political views and prejudices of those involved in implementing social policy.

In the first part of the book, the reader is taken from the changes in public health organisation of the mid-1970s to the interest of the Unit for the Study of Health Policy in Unemployment, and the intervention of Harvey Brenner in the debate together with the associated publicity received in the mass media. From the Black report in the early 1980s research progressed via the British Regional Heart Study and the important OPCS Longitudinal Study to Beale's fascinating account of the effect of unemployment on health in a general practice setting. Throughout the first part of the book a fascinating portrait is painted of the various players in the debate.

The second part of the book describes how both the official and scientific response to the

data and associated hypotheses were constructed, as well as exploring the way in which the relationship between research and policy debates are understood and conducted.

Those with established interest in unemployment and health will be familiar with many of the ideas that are presented, while those working in public health or entering upon social science research which may have significant policy implications will find it an interesting and entertaining read. They will be occasionally annoyed by terms such as "happenstances" and "know-ledge" as well as the fact that important work is often described long before a reference to it appears in the text. They will probably also dislike the use of footnotes (which actually appear at the end of chapters) that contain information which either should have been included in the main text or left out altogether. They may also find the price excessive for what is a relatively short book.

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A History of the Nuffield Provincial Hospitals Trust—1940–1990. Gordon McLachlan. (Pp 417; £25.00) Nuffield Provincial Hospital, London, 1992. ISBN 0-500574-79-8.

There is a temptation, when reviewing this book, to concentrate on the subject rather than the qualities of the book. The author was secretary of the trust from 1955 to 1986—about two thirds of its first half-century. He is therefore exceptionally placed to describe the activities supported.

What a range is presented! After an introductory chapter describing the creation of the trust, there follow chapters looking at each of the five decades. The author has identified different themes or emphases which succinctly describe the changing attitudes and priorities of the trustees.

Each chapter follows broadly the same pattern. After a brief resume, there is a detailed statement of the activities supported. It ends with a supplement listing the major research and developments undertaken in the decade in question. It is difficult to find an area of the health service which has not benefited.

The layout of the book is easy on the eye and on most pages there are phrases, and, indeed, single words, in bold type which draw attention to themes or important issues. It could be thought that this panders to those who only want to skim quickly through the book, and perhaps it is not one to read from cover to cover all at once. It is largely a statement of consecutive events and, indeed, any idea that it makes judgements on success or failure is expressly disclaimed.

Just as one thinks that this is all that it is, there are 40 pages, printed on grey paper, of an addendum entitled "Trust Perspectives". Here there are reflections and notes on trust policy and actions over the years.

It makes clear the important wisdom of the trustees and their officers in bridging the interfaces between the governments of the day, the health services, and the health of the people. It needs someone else to examine this theme in greater detail.

D H VAUGHAN

Consultant in Public Health Medicine

Healing the Schism: Epidemiology, Medicine, and the Public's Health. Kerr L White. (Pp 296; DM98) Springer-Verlag, New York, 1991. ISBN 0-387-97574-8.

This book is a closely argued and eloquent plea for the healing of the separation of epidemiology, medicine and public health. It traces the historical development of these subjects and describes how their tragic separation has occurred on both sides of the Atlantic. Clearly written and well referenced, this book contains relevant extracts from many of the founding fathers of these subjects.

In his foreword, Halfdan Mahler, Director General Emeritus of WHO gives his conviction of the transcendental importance of the matters addressed in this book. Perhaps a golden age of physicians, more interested in aetiology, economic circumstances, domestic environment, nutrition and education, never was as widespread as is sometimes implied in this book. Broad vision is characteristic of many great physicians from all ages. But the schism is all too clearly, sometimes painfully, described. Maybe we have moved on from the quoted comment of a Professor of Surgery (Theodor Billroth in 1875) "The fanatical champions of public health are fighting for a goal that is too high for my myopic vision. I can admire the struggle, but I cannot become interested in it". Kerr White's thesis on the need to heal this schism is utterly persuasive to me; will it be read, and how will it look, from the other side of the abyss? There is less hostility now but a tendency to admit the contribution of public health while sometimes reducing our resources. Kerr White describes in detail the activities of those who have tried to tackle this problem. He documents the work of INCLEN (International Clinical Epidemiological Network) and the Rockefeller Foundation, and his own pivotal role. As Mahler says in his foreword "Health professionals who complement each other's knowledge and skills can be reunited through their common reliance on epidemiology as a fundamental science for the entire health enterprise".

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Isolation, Migration and Health. Eds D F Roberts, N Fujiki, K Torizuka. (Pp 267; £37.50) Cambridge University Press, Cambridge, 1992. ISBN 0-521-41912-3.

Most diseases result from an interaction between genetic and environmental factors and studies of isolates and migrant populations are classic approaches to help unravel this inter-relationship. The topic was thus a logical choice for the 20th anniversary of the International Association of Human Biologists which was held in Japan in July 1990. This book summarises the conference proceedings and includes clinical studies of several less widely known Asian isolates (from northern Siberia, Japan, Papua New Guinea, and India); studies on migrant populations (from Polynesia, the Saharan desert, the eastern Adriatic, and Japan); analyses of factors affecting population dynamics and applications of protein and DNA polymorphisms to try and understand ancestral relationships. DNA analysis has been a particularly important recent development in this field as it

reveals far more variation than had been apparent in clinical and/or protein studies. The limitations and applications of various approaches are discussed and these proceedings will be of interest to population geneticists and epidemiologists who wish to study an isolate or a migrant population at a clinical, biochemical, or molecular level.

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Equity in the Finance and Delivery of Health Care, An International Perspective Eds E van Doorslaer, A Wagstaff, F Rutten. (Pp 416; £37.50) Oxford Medical Publications, Oxford, 1992. ISBN 0 19 2622 919.

This collection of papers is published as number 8 in the Commission of the European Communities Health Services Research Series. The editors are three of Europe's leading health economists.

The work on which the book is based was funded by the European Community's COMAC-Health Services Research Committee and the Rockefeller Foundation. In addition to contributions from most of the member states, there are articles from Switzerland and the USA.

The book is in three parts. The first provides an overview of the equity issues involved in the finance and delivery of health care. Part 2 considers these issues in 10 countries, and the third part reflects on equity in health care from a variety of perspectives—including a look at equity in five developing countries.

What might have been a rather patchy endeavour turns out to be a coherent and cohesive piece of work and a must for anyone interested in either the principles or the practice of equity in health care. There is a pattern to the book as Alan Maynard picks up in his foreword in that a common protocol has been applied across all the countries included.

Two of the most important aspects of the empirical work in the book which distinguishes it from previous cross-country comparisons, as the editors themselves note, are that the study employs micro-level data and that a common methodology has been adopted. Clearly readers will want to look specifically at their own country's results but also more generally at the two chapters that summarise the cross-country comparisons with respect to delivery and finance. Within these chapters too there are useful discussions of the merits of different ways of measuring inequities in health care.

For this reviewer, however, I found section 3 of greatest interest. Here a number of authors reflect on various aspects, both in principle and in practice, of equity in health care. There are lots of interesting observations here—from Le Grand's suggestions for new ways in relation to equity of "slicing" a society for example in terms of gender, through Culyer's comments about the need to look at equity in a society more generally in order to set equity in health and health care in context, through to the observation from Davis that while the US health financing system "has an extreme degree of horizontal inequity" nonetheless "with the exception of low income individuals who are not covered by public programmes... use of health services is relatively uniform across income classes".